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## BIB DATA SHEET

CONFIRMATION NO. 6397

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/777,518	02/12/2004	514	1617	50164/033002
	RULE			

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/447,366 02/14/2003  
 and claims benefit of 60/447,412 02/14/2003  
 and claims benefit of 60/447,415 02/14/2003  
 and claims benefit of 60/447,553 02/14/2003  
 and claims benefit of 60/447,648 02/14/2003  
 and claims benefit of 60/464,753 04/23/2003  
 and claims benefit of 60/503,026 09/15/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***  
 05/11/2004

Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No /JENNIFER MYONG M KIM/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY  MA	SHEETS DRAWINGS  0	TOTAL CLAIMS  61	INDEPENDENT CLAIMS  9
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**ADDRESS**

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 UNITED STATES

**TITLE**

Combination therapy for the treatment of immunoinflammatory disorders

FILING FEE RECEIVED 1077	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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